HERITAGE SQUARE HEALTH CARE CENTER

5404 WEST LOOMIS ROAD

GREENDALE	53129	Phone: (414) 421-0088		Ownership:	Corporation
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Con	junction with 1	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and Sta	affed (12/31/05):	100	Title 18 (Medicare) Certified?	Yes
Total Licensed	Bed Capacity	(12/31/05):	100	Title 19 (Medicaid) Certified?	No
Number of Resid	dents on $12/31$	/05:	73	Average Daily Census:	87

Age, Gender, and Primary Diagnosis of	Length of Stay (12/31/05)						
Primary Diagnosis	%	Age Groups 	*	 Less Than 1 Year 1 - 4 Years	89.0 9.6		
Developmental Disabilities	0.0	Under 65	9.6	More Than 4 Years	1.4		
Mental Illness (Org./Psy)	6.8	65 - 74	13.7				
Mental Illness (Other)	0.0	75 - 84	53.4		100.0		
Alcohol & Other Drug Abuse	0.0	85 - 94	23.3				
Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent			
Cancer	11.0			Nursing Staff per 100 Resid	dents		
Fractures	27.4		100.0	(12/31/05)			
Cardiovascular	11.0	65 & Over	90.4				
Cerebrovascular	15.1			RNs	18.5		
Diabetes	6.8	Gender	%	LPNs	26.2		
Respiratory	5.5			Nursing Assistants,			
Other Medical Conditions	16.4	Male	32.9	Aides, & Orderlies	38.7		
		Female	67.1				
	100.0	İ					
		İ	100.0	İ			

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	2		amily Care			Managed Care			
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	49	100.0	442	0	0.0	0	0	0.0	0	12	100.0	226	0	0.0	0	12	100.0	340	73	100.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	49	100.0		0	0.0		0	0.0		12	100.0		0	0.0		12	100.0		73	100.0

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Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of $12/31/05$										
Deaths During Reporting Period												
					% Needing		Total					
Percent Admissions from:		Activities of	8	As	sistance of	% Totally	Number of					
Private Home/No Home Health	1.8	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents					
Private Home/With Home Health	0.1	Bathing	5.5		16.4	78.1	73					
Other Nursing Homes	0.2	Dressing	9.6		61.6	28.8	73					
Acute Care Hospitals	96.1	Transferring	8.2		60.3	31.5	73					
Psych. HospMR/DD Facilities	0.0	Toilet Use	12.3		50.7	37.0	73					
Rehabilitation Hospitals	1.8	Eating	56.2		32.9	11.0	73					
Other Locations	0.0	*******************										
Total Number of Admissions	841	Continence		%	Special Treatmen	nts	8					
Percent Discharges To:		Indwelling Or Extern	nal Catheter	13.7	Receiving Resp	piratory Care	0.0					
Private Home/No Home Health	40.6	Occ/Freq. Incontine	nt of Bladder	39.7	Receiving Trad	cheostomy Care	2.7					
Private Home/With Home Health	32.1	Occ/Freq. Incontine	nt of Bowel	39.7	Receiving Suct	tioning	1.4					
Other Nursing Homes	2.2	ĺ			Receiving Osto	omy Care	2.7					
Acute Care Hospitals	15.5	Mobility			Receiving Tube	e Feeding	2.7					
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mecl	hanically Altered Diets	s 11.0					
Rehabilitation Hospitals	0.0	İ										
Other Locations	0.0	Skin Care			Other Resident (Characteristics						
Deaths	4.4	With Pressure Sores		19.2	Have Advance l	Directives	31.5					
Total Number of Discharges		With Rashes		15.1	Medications							
(Including Deaths)	857	į			Receiving Psyc	choactive Drugs	9.6					
		•			-							

		Own	Ownership:		Size:	Lic	ensure:			
	This	Proprietary		100	-199	Ski	lled	Al	1	
	Facility	Peer	Peer Group % Ratio		Group	Peer Group		Faci	lities	
	%	%			Ratio	%	Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	87.0	85.1	1.02	84.6	1.03	86.5	1.01	88.1	0.99	
Current Residents from In-County	90.4	82.7	1.09	87.4	1.03	84.9	1.07	77.6	1.17	
Admissions from In-County, Still Residing	7.0	15.8	0.45	17.0	0.41	17.5	0.40	18.1	0.39	
Admissions/Average Daily Census	966.7	247.5	3.91	221.6	4.36	200.9	4.81	162.3	5.96	
Discharges/Average Daily Census	985.1	250.7	3.93	225.9	4.36	204.0	4.83	165.1	5.96	
Discharges To Private Residence/Average Daily Census	716.1	109.5	6.54	100.1	7.15	86.7	8.26	74.8	9.57	
Residents Receiving Skilled Care	100	96.3	1.04	97.0	1.03	96.9	1.03	92.1	1.09	
Residents Aged 65 and Older	90.4	84.6	1.07	90.1	1.00	90.9	0.99	88.4	1.02	
Title 19 (Medicaid) Funded Residents	0.0	59.3	0.00	55.5	0.00	55.0	0.00	65.3	0.00	
Private Pay Funded Residents	16.4	13.3	1.24	21.9	0.75	22.5	0.73	20.2	0.82	
Developmentally Disabled Residents	0.0	1.9	0.00	1.2	0.00	1.1	0.00	5.0	0.00	
Mentally Ill Residents	6.8	29.4	0.23	28.6	0.24	31.0	0.22	32.9	0.21	
General Medical Service Residents	16.4	26.5	0.62	30.3	0.54	26.5	0.62	22.8	0.72	
Impaired ADL (Mean)	59.7	53.7	1.11	52.9	1.13	52.3	1.14	49.2	1.21	
Psychological Problems	9.6	53.4	0.18	56.3	0.17	58.3	0.16	58.5	0.16	
Nursing Care Required (Mean)	6.8	7.7	0.89	6.9	1.00	7.3	0.94	7.4	0.92	